

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF United States of America		COURT CASE NUMBER 1:03cr192
DEFENDANT Robert L. Buckheit		TYPE OF PROCESS Final Disposition
SERVE ▶ AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN	
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:		Number of process to be served with this Form - 285	2004 NOV 23 11:53 AM U.S. MARSHALS SERVICE RECEIVED
United States Attorney's Office 228 Walnut St., Suite 220, P.O. Box 11754 Harrisburg, PA 17108		Number of parties to be served in this case	
		Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, Aliens, etc.)

Fold

Fold

Dispose of property pursuant to Final Order of Forfeiture.

Signature of Attorney or other Originator requesting service on behalf of: James T. Clancy, AUSA by <i>[Signature]</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER (717) 221-4482	DATE 11/8/04
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 67	District of Origin No. 1	District to Serve No. 1	Signature of Authorized USMS Deputy or Clerk <i>[Signature]</i>	Date 11/23/04
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)				A person of suitable age and discretion then residing in the defendant's usual place of abode. <input type="checkbox"/>	
Address (complete only if different than shown above)				Date of Service	Time am pm
PER <i>[Signature]</i> DEPUTY CLERK				Signature of U.S. Marshal or Deputy	
Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or Amount of Refund

REMARKS: Recycled UNICOR. 11/16/04